

## **ORDER(S) OF THE HEALTH OFFICER**

Please read all information on this form carefully. Failure to comply with this Order constitutes a misdemeanor.

PURSUANT TO THE AUTHORITY IN THE CALIFORNIA HEALTH AND SAFETY CODE, THE HEALTH OFFICER OF THE COUNTY OF SAN MATEO HEREBY ISSUES THE FOLLOWING ORDER(S):

DATE ORDER ISSUED: September 11, 2010

THIS ORDER SHALL REMAIN IN EFFECT UNTIL CARRIED OUT OR RESCINDED BY THE HEALTH OFFICER.

DATE ORDER RESCINDED \_\_\_\_\_ BY \_\_\_\_\_

ORDER ISSUED TO: **The following properties located within the September 9 San Bruno fire zone.**

1100 to 1131 Glenview Drive, San Bruno CA  
1110 to 1121 Vermont Way, San Bruno, CA  
1700 to 1771 Claremont Drive, San Bruno, CA  
1701 to 1741 Earl Avenue, San Bruno, CA  
930 to 991 Glenview Drive San Bruno, CA  
1611 to 1690 Claremont Drive, San Bruno, CA  
1101 to 1131 Farmont Drive, San Bruno, CA  
2721 to 2790 Concord Way, San Bruno, CA

### **NEED FOR ORDER:**

Your property is located within the area affected by the fire. The fire may have made exposure to hazardous materials more likely. In order to prevent such exposures and protect the health and safety of everyone living or doing business in the area, all homes, businesses, or other possessions located within the fire zone will have hazardous materials removed and disposed safely by trained personnel.

### **YOU ARE HEREBY ORDERED TO COMPLY WITH THE FOLLOWING ORDER(S):**

Allow Environmental Health personnel authority to access above listed properties with the sole purpose to remove all fire-affected and unsafe hazardous waste materials from your property (California Code of Regulations, Title 17 §2501)

**If you have any questions, you may contact Dean Peterson at (650) 224-7293.**

ORDERED BY:



Alvaro Garza, M.D., M.P.H.  
Deputy Health Officer  
San Mateo County Health System

**Proof of Personal Service**

I, the undersigned say:

I am over the age of 18.

My address is: \_\_\_\_\_

I served the ORDER(S) OF THE HEALTH OFFICER upon the below named person, by  
Delivering to and leaving with the person named, at the time and place set forth:

**Name of Person Served:** \_\_\_\_\_

Date, Time, & Place of Service:

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Place: \_\_\_\_\_

I declare under the penalty of perjury under the laws of the State of California the foregoing is true and correct.

Executed on \_\_\_\_\_, 2010 at \_\_\_\_\_, California.

Name (Print) \_\_\_\_\_

Signature \_\_\_\_\_